

County: Rock
MEMORIAL COMMUNITY HOSPITAL LTC FACILITY
313 STOUGHTON ROAD

Facility ID: 3050

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EDGERTON 53534 Phone: (608) 884-1330
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? Yes
Number of Beds Set Up and Staffed (12/31/01): 61
Total Licensed Bed Capacity (12/31/01): 61
Number of Residents on 12/31/01: 61

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 60

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	Yes					1 - 4 Years		31.1	
Supp. Home Care-Personal Care	No					More Than 4 Years		41.0	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.6	Under 65	1.6			27.9	
Day Services	No	Mental Illness (Org./Psy)	16.4	65 - 74	1.6			-----	
Respite Care	No	Mental Illness (Other)	21.3	75 - 84	24.6			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	63.9	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	3.3	95 & Over	8.2	Full-Time Equivalent			
Congregate Meals	No	Cancer	1.6		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	Yes	Fractures	4.9		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	19.7	65 & Over	98.4	-----			
Transportation	No	Cerebrovascular	11.5		-----	RNs			
Referral Service	No	Diabetes	3.3	Sex	%	LPNs			
Other Services	No	Respiratory	9.8		-----	Nursing Assistants,			
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	6.6	Male	19.7	Aides, & Orderlies			
Provide Day Programming for Developmentally Disabled	No		100.0	Female	80.3				
					100.0	-----			

Method of Reimbursement

Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care							
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	2	4.9	119	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.3
Skilled Care	0	0.0	0	37	90.2	101	0	0.0	0	20	100.0	152	0	0.0	0	0	0.0	0	57	93.4
Intermediate	---	---	---	2	4.9	83	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		41	100.0		0	0.0		20	100.0		0	0.0		0	0.0		61	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	17.1	Daily Living (ADL)	Independent			
Private Home/With Home Health	14.6	Bathing	0.0	68.9	31.1	61
Other Nursing Homes	14.6	Dressing	8.2	70.5	21.3	61
Acute Care Hospitals	48.8	Transferring	9.8	70.5	19.7	61
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	8.2	68.9	23.0	61
Rehabilitation Hospitals	0.0	Eating	63.9	19.7	16.4	61
Other Locations	4.9	*****				
Total Number of Admissions	41	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	3.3	Receiving Respiratory Care		19.7
Private Home/No Home Health	7.7	Occ/Freq. Incontinent of Bladder	90.2	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	17.9	Occ/Freq. Incontinent of Bowel	77.0	Receiving Suctioning		0.0
Other Nursing Homes	2.6			Receiving Ostomy Care		0.0
Acute Care Hospitals	2.6	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	3.3	Receiving Mechanically Altered Diets		39.3
Rehabilitation Hospitals	0.0					
Other Locations	5.1	Skin Care		Other Resident Characteristics		
Deaths	64.1	With Pressure Sores	1.6	Have Advance Directives		96.7
Total Number of Discharges (Including Deaths)	39	With Rashes	0.0	Medications		
				Receiving Psychoactive Drugs		60.7

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	98.4	88.1	1.12	84.6	1.16
Current Residents from In-County	95.1	83.9	1.13	77.0	1.24
Admissions from In-County, Still Residing	41.5	14.8	2.80	20.8	1.99
Admissions/Average Daily Census	68.3	202.6	0.34	128.9	0.53
Discharges/Average Daily Census	65.0	203.2	0.32	130.0	0.50
Discharges To Private Residence/Average Daily Census	16.7	106.2	0.16	52.8	0.32
Residents Receiving Skilled Care	96.7	92.9	1.04	85.3	1.13
Residents Aged 65 and Older	98.4	91.2	1.08	87.5	1.12
Title 19 (Medicaid) Funded Residents	67.2	66.3	1.01	68.7	0.98
Private Pay Funded Residents	32.8	22.9	1.43	22.0	1.49
Developmentally Disabled Residents	1.6	1.6	1.05	7.6	0.22
Mentally Ill Residents	37.7	31.3	1.20	33.8	1.12
General Medical Service Residents	6.6	20.4	0.32	19.4	0.34
Impaired ADL (Mean)*	52.5	49.9	1.05	49.3	1.06
Psychological Problems	60.7	53.6	1.13	51.9	1.17
Nursing Care Required (Mean)*	7.6	7.9	0.96	7.3	1.03